POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.u.		10/28/00
O.I.P.E. CLASSIFIER		8	11-600
FORMALITY REVIEW	yz	9ot	12/20/00
RESPONSE FORMALITY REVIEW	MT	523	04/19/01

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Final	Original	3/29/02	10/29/02	5/29/03						
—	1	✔	=	✔						
	2	O		✔						
	3	O		✔						
	4	O								
	5	O								
	6	O								
	7	O								
	8	O								
	9	✔		✔						
	10	✔	✔	✔						
	11	✔	✔	✔						
	12	✔	✔	✔						
—	13	✔	✔	✔						
	14		✔							
	15		✔							
	16									

(Columns for claims 1–50, 51–100, and 101–150 are otherwise blank.)

If more than 150 claims or 10 actions
staple additional sh et her